DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 554344	RECEIPT DATE: 05 / 12 / 00
IA NUMBER: PCT/ EP99 / 00314	IA FILING DATE: 01 / 18 / 99
FAMILY NAME: VERVUURT	DELAY WAIVED (Y/N): Y
GIVEN NAME: FRANSISCUS ELISABETH	WILL DEMAND RECEIVED (Y/N): Y
P <i>RIORITY CLAIME</i> D (Y/N): Y	PRIORITY DATE: 01 / 23 / 98
NO BASIC FEE (Y/N): N	US D <i>ESIGNATED ONLY</i> (Y/N): N
ATTORNEY DOCKET NUMBER: PTT-93	COUNTRY:
CORRESPONDENCE NAME/ADDRESS: CUSTOMER	NUMBER: 007265 TELEPHONE 9085306671
	FAX

NAME: MICHAELSON AND WALLACE

PARKWAY 109 OFFICE CENTER

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P 0 B0X 8489

I O DON OTO

CITY: RED BANK

STATE/COUNTRY: NJ ZIP: 07701

EMAIL:

APPLICATION TITLES:

ATM NETWORK

TAB TO LAST POSITION. PUSH SEND